STATEMENT OF ORGANIZATION		OFFICE USE (	
Name and Address of Committee	2. Date of this Statement	s/o	
Committee to Re- Elect Bobby J. Guide	1-12-15	1/12	<b>=</b> 5
P. D. Box 417 Port Barre, La. Check It. 70577	Sestimated Membership  4. Amended Statement?		00029
New Committee Monthly Filer	YesNo	#896415 #4048	
5. All Committee Officers and Directors (including Chairperson, Treasurer  a. Name  b. Position  Chairperson  Position			>57 <b>7</b>
a. Name  Dennifer L. Savoie Chairperson P.D.  Same  Frank J. Guidroz, In Hwy. 743 Ope  Layne G. Godchaux P.O. Bo  6. Affiliated Organizations  (Any organization, other than a political committee, which directly or indicated the committee of the	× 111 TORE	arecjas.	<u> </u>
a. <u>Name</u> b. <u>Address</u>		c. Relationship to Committee	,
None			
7. All Depositories for Committee Funds (committee funds must be depos funds.)	ited in one or more banks or saving	s and loan institutions or money m	ıarket mutual
American Bankt Opela Trust Company	Box 1819 ousas, La. 705	70 S	
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Che Committee			liary
b. Name of Candidate  Bobby J. Guidroz		c. Office Sought by the Candida	ite (1)
9. a. Name of Person Preparing Report Jennifer	Lanclos Save	یر'د	
b. Daytime Telephone 337 - 948 - 5801		4	
10. WE HEREBY CERTIFY that the information contained in this STATEMS and belief.	ENT OF ORGANIZATION is true and	d correct to the best of our knowled	ge, information
This 12 day of January 2015  Signature of Complittee Chairperson		3 7 9 4 8 - 5 8 me Telephone Number	<u>ට</u> /
Signature of Committee Treasurer, if any	\ <u>33</u>	7-948-58 ime Telephone Number	<u>O</u> f